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Name of Person Filing <b>JOHN WILLIAMS</b>	File Number <b>U-</b>
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**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<b>8. Name and address of Business (including trade name, if any).</b>  Name <b>LABORERS' TRUST FUNDS</b>  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street <b>201 QWEEN ANNE AVENUE NORTH, STE 100</b>  City <b>SEATTLE</b>  State <b>Washington</b> ZIP Code + 4 <b>98109</b>	<b>9. Business deals with:</b>  <div style="margin-left: 40px;"> <input type="checkbox"/> a. Labor Organization  <input checked="" type="checkbox"/> b. Trust  <input type="checkbox"/> c. Employer       </div>
<b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b>  Name <b>NORTHWEST LABORERS-EMPLOYERS TRUST FUNDS</b>  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street <b>201 QWEEN ANNE AVENUE NORTH, STE 100</b>  City <b>SEATTLE</b>  State <b>Washington</b> ZIP Code + 4 <b>98109</b>	<b>11.a. Nature of such dealing.</b> <b>PROVIDE HEALTH, WELFARE AND PENSION BENEFITS TO MEMBERS</b>  <hr/> <b>11.b. Approximate dollar value of such dealing.</b> <b>\$646</b>  <b>12.a. Nature of interest held or income received.</b> <b>FOR ATTENDANCE TO TRUST FUND MEETINGS</b>  <hr/> <b>12.b. Amount.</b>

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

<b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b>  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State                      ZIP Code + 4	<b>14.a. Nature of payment.</b>            
<b>13.b. Is the Business an Employer                      or Consultant                      ?</b>	<b>14.b. Amount of payment.</b>